

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 812495/150 (10.230)										
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="margin: 0;">CERTIFICATE OF MAILING</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.</p> <p>Signature: _____</p> <p>Name: _____</p> </div> <div style="width: 55%;"> <p style="margin: 0;">In re Application of Goodwin et al.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number 09/273,238</td> <td style="width: 50%;">Filed 3/19/99</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 2px;">For OPTIMIZATIONS FOR TUNNELING BETWEEN A BUS AND A NETWORK</td> </tr> <tr> <td style="width: 50%;">Group Art Unit 2663</td> <td style="width: 50%;">Examiner Min Jur</td> </tr> </table> </div> </div>			Application Number 09/273,238	Filed 3/19/99	For OPTIMIZATIONS FOR TUNNELING BETWEEN A BUS AND A NETWORK		Group Art Unit 2663	Examiner Min Jur				
Application Number 09/273,238	Filed 3/19/99											
For OPTIMIZATIONS FOR TUNNELING BETWEEN A BUS AND A NETWORK												
Group Art Unit 2663	Examiner Min Jur											
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding-bottom: 5px;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</td> <td style="width: 20%; text-align: right; padding-bottom: 5px;">\$ _____</td> </tr> <tr> <td style="padding-bottom: 5px;"><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)</td> <td style="text-align: right; padding-bottom: 5px;">\$ _____</td> </tr> <tr> <td style="padding-bottom: 5px;"><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050)</td> <td style="text-align: right; padding-bottom: 5px;">\$ _____</td> </tr> <tr> <td style="padding-bottom: 5px;"><input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)</td> <td style="text-align: right; padding-bottom: 5px;">\$ 1,640</td> </tr> <tr> <td style="padding-bottom: 5px;"><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)</td> <td style="text-align: right; padding-bottom: 5px;">\$ _____</td> </tr> </table> <p style="margin-top: 10px;"> <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>141138</u>. I have enclosed a duplicate copy of this sheet. </p> <p style="margin-top: 10px;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 20px;"> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____. <u>/Gunnar G. Leinberg/</u> <u>January 24, 2008</u> Signature Date </p> <p style="margin-left: 20px;"> <u>Gunnar G. Leinberg</u> <u>(585) 263-1014</u> Typed or printed name Telephone Number </p> <p style="margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050)	\$ _____	<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)	\$ 1,640	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)	\$ _____
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____											
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)	\$ _____											
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050)	\$ _____											
<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)	\$ 1,640											
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)	\$ _____											